PATENT APPLICATION FEE DETERMINATION RECOR Effective October 1, 2001									Application or Docket Number 10/051, 46,7 A-64257 2/2015					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS			18 18				Г	RATE		1	RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA		BA	BASIC FEE 370		OR	BASIC FEE	740.00		
TOTAL CHARGEABLE CLAIMS			minus 20=		·		7	K\$ 9=		OR	X\$18=			
INDEPENDENT CLAIMS			# minus 3 =		61			X42=	47	OR	X84=			
MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT				T,	140=	1	OR	+280=			
* If	the difference	in column 1 is	less than zero, enter "0" in column 2			L	TOTAL 1370		OR	TOTAL				
T 1/-N/ CLAIMS AS AMENDED - PART II										•	OTHER	THAN		
(Column 1)			(Column 2) (Column 3)			SMALL ENTITY			OR	SMALL	ENTITY			
AMENDMENT A		REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE	_	RATE	ADDI- TIONAL FEE		
	Total	- 18	Minus	** Q	Ö,	=	>	(\$\9=		OR	X\$18=			
	Independent	* 7	Minus	***	4	-	, >	(42=		OR	X84=			
	PINST PRESE	MIAHUN OF MI	JLTIPLE DE	PENUEN	CLAIM		+	140=		OR	+280=			
								TOTAL OIT. FEE	1	'	TOTAL ADDIT. FEE			
	(Column 1) (Column 2) (Column 3)							/II. FEE			A0011.1 CE1			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	*	Minus	**		=	×	(\$ 9=		OR	X\$18=			
	Independent	* NTATION OF MU	Minus	###	CL AUA		>	(42=		OR	X84=			
	THOTPHESE	IVIATION OF MIC	DETIFLE DE	PENDENT	CLAIM		+	140=		OR	+280=			
							ADD	TOTAL		OR	TOTAL ADDIT, FEE			
		(Column 1)		(Colur	mn 2)	(Column 3)								
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	*	Minus	**			×	\$ 9=		OR	X\$18=	Λ /		
	Independent	*	Minus	***		=	×	42=		OR	X84=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM													
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=			
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." *If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE											TOTAL ADDIT. FEE			
•	The "Highest Nun	nber Previously Pai	d For" (Total o	r Independ	ent) is the	highest numbe	r found i	n the ap	propriate box	in col	umn 1.			